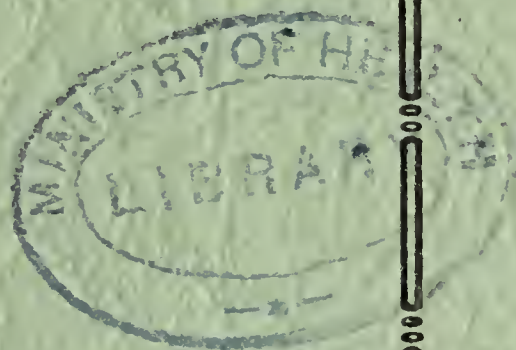


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SOWERBY BRIDGE
URBAN DISTRICT COUNCIL



THE
ANNUAL REPORT

of the

Medical Officer of Health

(J. LYONS, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.)

and

Senior Sanitary Inspector

(Wm. E. FOSTER, A.M.I.S.E., M.R.San.I.)

for the Year

1951


KERSHAW & ASHWORTH LTD., HEBDEN BRIDGE

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URBAN DISTRICT OF SOWERBY BRIDGE

Public Health Committee

Chairman of the Council:

Councillor C. W. MAUDE, J.P.

Vice-Chairman of the Council:

Councillor F. LORD

Chairman of the Health Committee:

Councillor C. G. HOPKINSON

Vice-Chairman of the Health Committee:

Councillor P. THOMPSON

Members of the Health Committee:

Coun. G. A. Benbow	Coun. R. Blakeley
„ A. Butterworth	„ A. Crossfield
„ W. Crossfield	„ J. Greenwood
„ W. Greenwood	„ H. Haigh
„ E. D. Hall	„ C. Hollas
„ Miss E. Judson	„ E. Lumb
„ S. Muff	„ E. O'Donnell
„ G. H. Petty	„ G. Sharpe
„ N. Sutcliffe	„ W. Tate
„ R. Tidswell	„ G. Wood

Members of the Health Sub-Committee:

Coun. C. G. Hopkinson (Chairman)
„ P. Thompson (Vice-Chairman)
„ A. Crossfield
„ W. Crossfield
„ J. Greenwood
„ H. Haigh
„ Miss E. Judson
„ E. O'Donnell
„ N. Sutcliffe

PUBLIC HEALTH STAFF

SOWERBY BRIDGE U.D.C.

Medical Officer of Health:

J. LYONS, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Deputy Medical Officer of Health:

G. A. WILTHEW, M.B., B.S., B.Sc.

Chief Sanitary Inspector:

W. E. FOSTER, A.M.I.S.E., M.R.San.I.

Additional Sanitary Inspector:

J. HOLMES, C.R.S.I.

WEST RIDING COUNTY COUNCIL

Preventive Medical Services: Health Division 19.

Staff with duties in the Sowerby Bridge District—

Divisional Medical Officer:

As above (M.O.H.).

Deputy Divisional Medical Officer:

As above (Deputy M.O.H.).

Assistant County Medical Officer, and Medical Officer to Sowerby Bridge Maternity and Child Welfare Clinics:

ALICE SEELIG, M.D.

School Dental Officer:

Vacant.

Health Visitors:

E. B. NOWERS, S.R.N., S.C.M., R.S.C.N.

*R. I. M. SCHOLICK, S.R.N., S.C.M.

*M. O. FORRESTER, S.R.N., S.C.M. (Commenced
2-4-51).

M. SOUTHWELL, S.R.N., S.C.M. (Commenced
1-12-51).

Tuberculosis Health Visitor:

B. G. NICHOLL, S.R.N.

Mental Health Social Worker:

E. C. WROE, S.R.N., S.C.M., R.M.N., H.V.

Midwives:

C. BURCHNALL, S.C.M. (Resigned 28-2-51).

A. G. REID, S.R.N., S.C.M., Queen's Nurse (Transferred from Home Nursing 23-4-51).

*F. A. NEAVE, S.C.M. (Resigned 1-5-51).

M. RICHARDSON, S.R.N., S.C.M. (Commenced 1-10-51).

*M. HOLDEN, S.R.N., S.C.M. (Relief Midwife for whole Divisional Area).

Home Nurses:

A. KLEINDIENST, S.R.N., R.F.N., Queen's Nurse.

*A. M. SCHOLICK, S.R.N., S.C.M., Queen's Nurse.

A. HOWARTH, S.R.N., S.C.M. (Transferred from Midwifery 1-5-51).

K. REID, S.R.N. (Commenced 21-5-51).

*E. S. SIDDALL, S.R.N., S.C.M., Queen's Nurse (Relief Home Nurse for whole Divisional Area).

* Also have duties in other parts of this Division.

HALIFAX AREA HOSPITALS MANAGEMENT COMMITTEE**Consultant Staff****Ear, Nose and Throat Surgeon:**

W. O. LODGE, M.D., F.I.C.S., F.R.C.S. (Edin.).

Chest Physician:

BERTRAM MANN, B.Sc., M.D., D.P.H..

Orthopædic Surgeon:

G. HYMAN, M.B., F.R.C.S.

Ophthalmic Surgeon:

R. W. GREATOREX, M.B., Ch.B.

Abraham Ormerod Medical Centre,
Todmorden,
October, 1952.

To the Chairman and Members of the Council.

Mr. Chairman, Lady and Gentlemen,

I have the honour to present the Fifth Annual Report since the inception of the scheme of Divisional Health Administration. Under this arrangement your Medical Officer of Health is also Divisional Medical Officer for the West Riding County Council's local health services and has similar functions in the Borough of Todmorden, the Urban Districts of Hebden Royd and Ripponden, and the Rural District of Hepton. The scheme has led to a closer integration of local authority health services.

The outstanding feature of the vital statistics was a sharp rise in the death rate to 16.4 per 1,000 as compared with 14 per 1,000 in the previous year, and an average of 14.5 for the five years 1946-50 inclusive. This was due to the influenza epidemic in the winter of 1951, the severest outbreak since 1933. Influenza was the primary cause of death in 13 cases but it also accelerated the death of a considerable number of patients who were already weakened by other illnesses or by old age.

For the second year in succession the infant mortality rate reached the remarkably low level of 23 per 1,000 live births, comparing very favourably with the national figure of 29.6. The infant mortality rate has always been accepted as a fairly reliable index of the general health of the whole community, varying proportionately with the incidence of malnutrition, disease, and ignorance. The fact that it is so low in Sowerby Bridge at present is a tribute to all branches of the medical and social services. It is also a reflection of the high level of economic prosperity enjoyed by the community over the past decade since it is poverty which is probably the biggest single factor influencing the development of malnutrition and disease. The study of vital statistics in the Calder Valley covering the past fifty years shows a remarkable improvement in maternal and child health. Maternal deaths were 15—20 times more common at the beginning of the century than at present, and infant deaths were 7 times commoner than now. The improvement was not however uniformly steady. Set-backs did occur from time to time and they usually coincided with periods of widespread unemployment and trade depression. Will this happen again? One would expect the first symptom of such a setback to be a tendency for more persons to fail to buy the whole of their food rations. There are no official figures to indicate whether this undue "tightening of

the belt " has in fact occurred during the recent textile trade recession but a few local food retailers say that it has. If true, it is an ominous sign of what may happen if the recession should tragically develop into a major "slump." One is firmly of the belief that economic conditions determine our standards of health to an even greater extent than the effectiveness or otherwise of all our medical and social services. £ s. d. is in fact probably more important than N.H.S.—though we should aim at keeping both.

The welfare of the aged continues to be a matter for concern, the problem being accentuated locally by the exceptionally high proportion of elderly persons in the population. Waiting lists of those needing institutional or hospital care continue to grow and even urgent cases still cannot be dealt with as expeditiously as one would wish. The picture is not however uniformly gloomy. Magnificent efforts to rehabilitate the chronic sick and give them a new lease of more active life are being made by Dr. S. G. McComb, the Medical Officer at St. John's Hospital, Halifax. As a measure of his success there are at present several patients in St. John's Hospital who have improved sufficiently to leave their beds and to be transferred to County Welfare Homes, where they can lead a more active, more social, and less dependent existence. But the County Council is experiencing very great difficulty in meeting this new demand on their accommodation, with the result that some patients are being unnecessarily detained in hospital. This is bad for the morale of the patients concerned and even worse for those who urgently need to fill their places in the hospital. The hospital authority is finding it difficult enough to meet its own obligations without the additional embarrassment caused by the County Council's temporary inability to honour a statutory responsibility.

Far more is now being done to help those old folk who with some assistance can be reasonably fit and happy in their own homes, which is after all where they most want to be. The Home Help Service has been extended in this Division and a greater proportion of the home helps' working time is being devoted to the elderly. The Home Nursing Service is working at full pressure and, although the nursing care of the aged is heavy work, often dirty, and sometimes thankless, the nurses are carrying on in the best traditions of their noble profession. The General Practitioners, too, deserve credit for their diligence with elderly patients. A periodic visit from the doctor, along with his smile and a chat, is often of greater value for these cases than any number of bottles of pigmented National Health Service 'liquor.' The Health Visitors, combining the qualifications and experience of nurse and social worker, play an invaluable role as medico-social investigators of the more difficult cases. Their advice to patients and relatives has often smoothed a furrowed brow, and their

reports on home conditions have been of great value to the hospitals in the assessment of priority for admission on social grounds. It cannot be too frequently stressed that the need for hospitalisation in the aged is dictated in nearly all cases by the social circumstances of the patients rather than by the nature of their illness. Improved facilities and assistance in the home can greatly reduce the pressure on "chronic-sick" beds.

The work of the Sowerby Bridge Old People's Welfare Committee deserves a special word of praise and encouragement. Among their activities have been the establishment of social centres at Luddendenfoot and West End, and the organisation of suppers, teas, concerts and other social and recreational functions. Members of the St. John's Ambulance and other voluntary organisations are also taking a more active interest in this problem. One hopes that voluntary organisations will continue to expand their good work. If one may be allowed to offer them a practical suggestion it is that an attempt be made to provide a Daily Meals Service for those who are alone and too infirm to do their own shopping and cooking. I have personally seen more malnutrition in the aged than in any other age group; a bread and jam diet accelerates the physical and mental deterioration of old age.

To turn to a social problem of a very different nature, namely that of children neglected or ill-treated in their own homes, one is able to report a new and interesting development. The causes of child neglect are numerous and varied and the handling of individual cases is correspondingly complex. Although the main burden falls on the broad and capable shoulders of the N.S.P.C.C., many other statutory and voluntary bodies including local authority departments are directly concerned. Co-ordination between all the officials concerned must be of the highest order if the basic causes of the neglect are to be treated. To ensure this the County Council, adopting the recommendations of a joint circular from the Home Office and the Ministries of Health and Education, has set up divisional co-ordinating committees under the chairmanship of the Divisional Medical Officers. The nucleus of the committee in the Todmorden/Sowerby Bridge Health Division consists of the local N.S.P.C.C. Inspector, the Divisional Education Officer, the Divisional Welfare Officer, Area Children's Officer, local Probation Officers, Area Officer of the National Assistance Board, and last (but not least) the local Police Inspectors. Where additional information or advice is required others may be called in, e.g., Chairman of the local Housing or Health Committee, Sanitary Inspector, Housing Manager, District Welfare Officer, Boarding-out Officer, Education Welfare Officer, Health Visitor, etc. Every case of suspected child neglect in the division, whether the neglect is wilful or otherwise, is reported

to me as Chairman of the Committee, and is then discussed in detail at the meetings which are held at 2-3 monthly intervals. [Cases requiring urgent legal action, generally a small minority, are of course dealt with in the ordinary way directly by the N.S.P.C.C.] Possible lines of action are considered and debated at length, every member having uppermost in his mind the desirability of removing or mitigating the causes of the trouble by social action and so maintaining the unity of the family, though the institution of measures for the prosecution of the parents and removal of the child or children from the home have sometimes to be recommended. Where the latter course is chosen it generally falls to the N.S.P.C.C. Inspector to take the case to the Courts. His position and status in the Court is strengthened by the fact that his action is supported by the carefully considered opinions of the members of the Committee who are prepared to give evidence if and when called upon to do so. It should be emphasised that the decisions of the Committee in no way interfere with the freedom of action of each individual officer (including the N.S.P.C.C. Inspector) who must always act in accordance with his conscience and his own specific duties. It is however a tribute to the harmonious working of the Committee that no official has so far been asked to take action with which he himself cannot agree.

In the majority of cases considered by the Committee some form of close supervision of the family is arranged and a decision made as to which department, or departments, should be responsible. This avoids the situation so often occurring in the past where a single family was visited at short intervals by a multitude of officials from different departments, each attempting in his or her own way, without consultation with other officers concerned, to pull the family out of the social morass into which it had sunk. They sometimes tugged in different directions with results which were, to say the least, ineffective and uneconomic, and the work of the N.S.P.C.C. was handicapped instead of helped.

The Committee has so far considered 13 cases of alleged neglect or ill-treatment and some idea of the depth and complexity of the problems may be given from the following statistical summary:—

Number of families investigated	...	...	...	13
Number with a history of serious marital discord, (e.g., divorce, separation, or frequent serious quarrels between parents)	...	...	...	11
Number with evidence of persistent irresponsibility or innate instability of the parents	...	...	...	10
Bad housing conditions	...	...	...	7
Illness in one or both parents	...	...	...	5
Number of families in receipt of National Assistance benefits over a long period	...	...	...	5

More than four children in the family	...	...	4
Intellectual sub-normality in either or both parents			4
Parents with police record	...	...	2
Known illegitimacy	...	...	1
Certifiable mental deficiency in either or both parents	...	...	Nil

Action recommended or endorsed by the Committee.

	No. of families concerned
Close informal supervision (including advice and instructions to parents) by N.S.P.C.C. Inspector or local authority officer	12
Legal action by N.S.P.C.C. for the care and protection of the children by the local authority (Children and Young Persons Act, 1933)	3
Informal temporary admission of neglected children to County Children's Homes (Children's Act, 1948)	4
Reference to N.S.P.C.C. headquarters (through the local Inspector) for consideration of prosecution of parents for wilful neglect (Children and Young Persons Act, 1933)	2
Admission of neglected child to residential special school for E.S.N. pupils (Education Act, 1944)	1
Admission of neglected child to residential hostel for maladjusted pupils (Education Act, 1944)	1
Statutory notices served by Divisional Medical Officer on parents for cleansing of children (Education Act, 1944)	1
Arrangements by Divisional Medical Officer (after consultation with general practitioner) for voluntary admission to hospital or convalescent home of seriously ill parent (National Health Service Act, 1946)	3
Reference to local Housing Committee with strong recommendation for rehousing or relief of overcrowding (Housing Act, 1936)	2
Reference to relatives of parents for the provision of practical assistance for the neglected children or for the family as a whole	3
Reference to Medical Officer of Health for special care and supervision of tuberculous parent (Public Health Act, 1936)	1

The results of the Committee's work have so far been distinctly encouraging. All members are impressed by the

better liaison and the greater effectiveness of measures taken. One would wish that there were similar opportunities for co-ordination in the much-divided and disarticulated National Health Service.

In conclusion, I wish to thank the members of the Council for their kindness, patience and co-operation, and to thank Mr. Foster, Sanitary Inspector, for his kindness and efforts to give me the sanitary circumstances of the area, and indeed to all your officials with whom I made contacts, personal and official.

I have the honour to be,

Your obedient servant,

J. LYONS, M.B., Ch.B., M.R.C.S.,

L.R.C.P., D.P.H.,

Medical Officer of Health.

SECTION I

Vital Statistics

STATISTICS

Area (Census 1951)	5,763 acres
Population, Registrar-General's estimate of Resident Population, mid 1951 ...	18,750
Population (Census 1951)	18,770
Number of dwelling-houses	6,637
Rateable value	£89,137
Product of a Penny Rate	£339

Summary of Vital Statistics

	Total	M	F	
Live Births— Legitimate Illegitimate	292 11	157 5	135 6	Birth Rate per 1,000 of the estimated resident Population: 16.2
Still Births— Legitimate Illegitimate	11 —	6 —	5 —	Rate per 1,000 total (live and still) births: 35.
All Deaths	307	139	168	Death Rate per 1,000 of the estimated resident population: 16.4
Deaths of infants under 1 year Legitimate Illegitimate	7 —	5 —	2 —	Infant Mortality Rate (Deaths under 1 year per 1,000 live births): 23.1

Causes of Death in Sowerby Bridge U.D.

						1951	
Cause of Death						M	F
1	Tuberculosis, respiratory	...	...	...	...	5	1
2	Tuberculosis, other	...	...	...	...	—	—
3	Syphilitic disease	...	...	...	...	—	—
4	Diphtheria	...	...	...	...	—	—
5	Whooping Cough	...	...	...	...	—	—
6	Meningococcal infections	...	...	...	...	—	—
7	Acute Poliomyelitis	...	...	...	...	—	—
8	Measles	...	...	...	...	—	—
9	Other infective and parasitic diseases	...	...	...	...	—	—
10	Malignant neoplasm, stomach	...	...	...	...	1	3
11	Malignant neoplasm, lung bronchus	...	...	...	...	4	2
12	Malignant neoplasm, breast	...	...	...	...	—	3
13	Malignant neoplasm, uterus	...	...	...	...	—	2
14	Other malignant and lymphatic neoplasms	...	...	...	...	11	16
15	Leukaemia, aleukaemia	...	...	...	...	—	—
16	Diabetes	...	...	...	...	1	4
17	Vascular lesions of nervous systems	...	...	...	...	16	24
18	Coronary disease, angina	...	...	...	...	18	12
19	Hypertension with heart disease	...	...	...	...	6	6
20	Other heart disease	...	...	...	...	24	48
21	Other circulatory disease	...	...	...	...	4	5
22	Influenza	...	...	...	...	1	12
23	Pneumonia	...	...	...	...	6	4
24	Bronchitis	...	...	...	...	11	4
25	Other diseases of respiratory system	...	...	...	...	2	—
26	Ulcer of stomach or duodenum	...	...	...	...	5	—
27	Gastritis, enteritis and diarrhoea	...	...	...	...	2	—
28	Nephritis and nephrosis	...	...	...	...	1	3
29	Hyperplasia of prostate	...	...	...	...	3	—
30	Pregnancy, childbirth, abortion	...	...	...	...	—	1
31	Congenital malformations	...	...	...	...	1	1
32	Other defined and ill-defined diseases	...	...	...	...	13	12
33	Motor vehicle accidents	...	...	...	...	—	—
34	All other accidents	...	...	...	...	2	3
35	Suicide	...	...	...	...	2	2
36	Homicide and operations of war	...	...	...	...	—	—
Total, all causes						139	168

Principal Vital Statistics for the year 1951:

Based on Registrar General's Figures

Comparison with neighbouring districts in County Health Division 19	Sowerby Br'ge U.D.	Ripponc'en U.D.	Todm'den M.B.	Hebden Royd U.D.	Hepton R.D.
BIRTH RATE:— (per 1,000 estimated population)	16.2	13.2	13.8	12.3	13.7
DEATH RATES:— (All per 1,000 estimated population). All Causes.	16.4	13.9	18.0	17.1	15.5
Infective and parasitic diseases *	—	—	0.16	—	0.25
Tuberculosis of respiratory system	0.32	0.38	0.26	0.39	—
Other forms of tuberculosis	—	—	—	—	—
Respiratory Diseases:—† (excluding tuberculosis of respiratory system)	2.13	1.32	3.01	2.55	2.70
Cancer	2.24	0.57	2.17	1.77	3.19
Heart and circulatory diseases†	6.56	5.84	7.14	6.58	6.38
Vascular lesions of nervous system	2.13	3.58	2.06	2.85	0.98
INFANT MORTALITY:— (Deaths under one year per 1,000 live births)	23.1	57.1	34.4	32.0	71.4
MATERNAL MORTALITY:— (Deaths of mothers in childbirth per 1,000 live and still-births)	3.18	—	—	—	—

* Combined death rate from syphilitic diseases, acute poliomyelitis, meningococcal infections, diphtheria, measles, whooping cough, and other infective and parasitic diseases.

† Combined death rate from influenza, bronchitis, pneumonia and other respiratory diseases, excluding tuberculosis of the respiratory system.

‡ Combined death rate from heart disease and other diseases of the circulatory system.

PRINCIPAL VITAL STATISTICS FOR THE YEAR 1951

Based on Registrar-General's Figures

	Sowerby Bridge U.D.	Aggregate West Riding Urban Districts	West Riding Admin. County	England and Wales (Provisional figures)
BIRTH RATE:— (per 1,000 estimated population)	16.2	15.6	15.8	15.5
DEATH RATES:— (All per 1,000 estimated population). All Causes.	16.4	13.5	12.7	12.5
* Infective and Parasitic Diseases	Nil	0.11	0.10	* *
Tuberculosis of Respiratory System	0.32	0.24	0.24	0.28
Other forms of Tuberculosis	Nil	0.04	0.04	0.04
Respiratory Diseases:— † (excluding tuberculosis of respiratory system)	2.13	1.90	1.81	* *
Cancer	2.24	1.89	1.80	1.96
Heart and Circulatory Diseases ‡	6.56	5.10	4.72	* *
Vascular lesions of the nervous system	2.13	1.86	1.72	* *
INFANT MORTALITY:— (Deaths under one year per 1,000 live births)	23.1	30.8	31.8	29.6
MATERNAL MORTALITY:— (Deaths of mothers in childbirth per 1,000 live and still births). Puerperal Sepsis	3.18	0.81	0.93	0.79

* Combined death rate from syphilitic diseases, acute poliomyelitis, meningococcal infections, diphtheria, measles, whooping cough, and other infective and parasitic diseases.

† Combined death rate from influenza, bronchitis, pneumonia and other respiratory diseases, excluding tuberculosis of the respiratory system.

‡ Combined death rate from heart disease and other diseases of the circulatory system.

* * Figures not available.

SECTION II

GENERAL PROVISION OF HEALTH SERVICES

(a) Hospitals

There is no hospital in Sowerby Bridge. Patients requiring hospital treatment are referred as a rule to hospitals under the administration of the Halifax Area Hospitals Management Committee (National Health Service). Included in this group are the Halifax General Hospital, Royal Halifax Infirmary, St. John's Hospital (for the aged and chronic sick), Shelf Sanatorium, Northowram Hospital for Infectious Diseases, Todmorden Fielden Hospital (for long stay medical cases in children), and Todmorden Stansfield View Hospital (for mental defectives).

Maternity beds are available at both the Halifax General and Royal Infirmary. Priority in booking is given to abnormal cases, mothers expecting their first child, and mothers with unsatisfactory home conditions.

Special hospitals (e.g., Mental Hospitals, special Orthopaedic Hospitals, Tuberculosis Sanatoria, etc.) outside the Halifax area are available when required; they are situated in various parts of the so-called "Leeds Hospitals Region" which in fact extends into all three Ridings.

(b) Professional Nursing in the Home

The County Council are responsible for the home nursing and midwifery services in Sowerby Bridge. There were four full-time Home Nurses and four full-time Midwives employed in 1951. Two of the Home Nurses and two of the Midwives, however, did not work wholly in the Sowerby Bridge area, having duties in other parts of the Divisional Area.

(c) Ambulance Facilities

The County Ambulance Service (Divisional Depot at Brighouse—telephone Brighouse 840) covers this district. Arrangements also exist with the Halifax County Borough Health Department for the use of their ambulances for the transfer of patients to and from their hospitals in Halifax.

(d) Clinics and Treatment Centres

(See following page).

(e) Laboratory Facilities

These are provided by the Public Health Laboratory Services (directed by the Medical Research Council for the Ministry of Health) at laboratories in Wakefield and Bradford.

(f) Issue of Anti-toxin, etc.

Supplies of diphtheria and tetanus anti-toxin are available at the Halifax Isolation Hospital and the Halifax General Hospital for issue to medical practitioners requiring it. By arrangement with the Regional Hospital Board supplies of tetanus anti-toxin are also kept at the Divisional Health Office. The Medical Centre, Todmorden, for the use of local medical practitioners in the Division.

A supply of re-agents for diphtheria and whooping cough immunisation is also available free of charge to private practitioners who have undertaken to participate in the West Riding County Council's schemes of immunisation.

Clinics and Treatment Centres

Infant Welfare

Allan House, Sowerby Bridge	Thursdays	2-0—4-0 p.m.
The Institute, Luddenden Foot	Fridays	2-0—4-0 p.m.

Ante-Natal and Post-Natal

Allan House, Sowerby Bridge	Mondays	2-0—4-0 p.m.
The Institute, Luddenden Foot	1st Friday in Month	2-0—4-0 p.m.

School Clinics

Allan House, Sowerby Bridge	Thursdays	10-0—12 noon
(a) Minor Ailments	As required	By arrangement
(b) Dental	As required	By arrangement
(c) Ophthalmic	As required	By arrangement
(d) Ear, Nose and Throat	Tuesdays	9-30—12-0 noon.
(e) Artificial Sunlight	Fridays	1-0—2-30 p.m.

Diphtheria Immunisation

Allan House, Sowerby Bridge	At any Minor Ailments or Welfare Clinics,
The Institute, Luddenden Foot	or by arrangement with Medical Officer.

SECTION III

W.R.C.C. PREVENTIVE HEALTH SERVICES

(a) Care of Mothers and Young Children

Sowerby Bridge and Luddenden Foot

Ante-Natal Clinics

Number of expectant mothers attending during the year	...	...	...	...	...	...	109
Total number of attendances	...	...	...	...	...	...	457

Child Welfare Clinics

Number of children seen by doctor during the year	...	...	...	...	...	...	1566
Total number of attendances	...	...	...	...	...	...	3274

Home Visiting of Infants

Total number of live births to Sowerby Bridge mothers	...	...	...	...	...	...	303
Number of first visits to children under 1 year	...	...	...	...	...	...	285
Total number of visits to children under 1 year	...	...	...	...	...	...	996
Total number of visits to children aged 1-5 years	...	...	...	...	...	...	1253

Day Nursery Accommodation

There is a Day Nursery situated on the Beech Recreation Ground to which Sowerby Bridge and Ripponden children may be admitted, priority for admission being granted according to the following categories:—

- (a) The young child whose mother is ill or having a baby.
- (b) The illegitimate child whose mother is seeking work.
- (c) Children of parents who cannot find suitable homes or are living in overcrowded and/or insanitary dwellings.
- (d) The young child of the widow who must educate and support the family unassisted, and also the young child of the mother whose husband is ill.

Where vacancies still remain after the above categories have been dealt with priority is then given to mothers engaged in the textile or armament industries.

Care of Premature Infants

Special equipment and nursing staff is available for use in the home in cases requiring them.

Provision of Maternity Outfits

These are provided free to mothers preparing for confinement in their own homes.

(b) Midwifery Service

Number of home confinements	...	...	...	75
Number of hospital confinements	...	...	...	239

Analgesia.—The Sowerby Bridge midwives are trained in the administration of gas and air analgesia and are

provided with the necessary equipment. Analgesia is available to all mothers desiring it subject to satisfactory medical examination by a doctor. It is hoped that more mothers will make use of this valuable service.

(c) Home Nursing Service

See Section II.

(d) Ambulance Service

See Section II.

(e) Health Visiting

The duties of the Health Visitor are combined with those of School Nurse. In pursuance of the National Health Service Act the scope of this service includes home visiting for the purpose of giving advice as to the care of children, and persons (including adults) suffering from illness, and of expectant and nursing mothers. The Health Visitor also gives advice in the home as to measures necessary to prevent the spread of infection.

(f) Home Helps

The recruitment of suitable women to be Home Helps again proved to be very difficult. During 1951, 25 cases were attended by Home Helps as compared with 20 cases the previous year, and the total number of hours worked was 2,354.

In accordance with the National Health Service Act, the County Council provide domestic help for households "where such help is required owing to the presence of any person who is ill, lying-in, an expectant mother, mentally defective, aged, or a child not over compulsory school age."

Of the 25 cases attended in 1951, Home Helps were provided for the following reasons:— 3 illness, 9 maternity, 1 mentally defective, and 12 aged and infirm.

(g) Care and After Care

Special provisions are in operation for the care and after care of patients suffering from tuberculosis, mental illness or defect, venereal disease, and other illnesses.

(h) School Health Service

Number of schools in district	...	...	...	18
Number of children in attendance at school at end of 1951	...	...	...	2621
Number of children examined at school during 1951	...	...	...	1107
this figure being made up as follows:—				
Routine examinations	...	...	...	647
Re-examinations	...	...	...	460
Number of children referred for treatment	...	...	...	89

(i) Immunisation and Vaccination

In accordance with the National Health Service Act, immunisation against diphtheria and vaccination against smallpox may be done either at the clinic or by the family doctor.

**Number of children in Sowerby Bridge who had completed
a full course of Immunisation at any time to 31-12-51**

Age at 31-12-51 i.e. born in year	Under 1	1	2	3	4	5 to 9	10 to 14	Total under 15
No. immunised	90	159	220	195	174	1085	984	2907

Estimated mid-year population	0 to 4 yrs.	5 to 14 yrs.	Total under 15
	1584	2309	3893

**Number of children in Sowerby Bridge who completed
a full course of Immunisation 1951**

Age	0-1	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Began and completed injections 1951	90	67	34	6	5	14	27	18	14	13	11	11	11	9	25
Total ...	355														

Immunised in previous years re-treated 1951	—	—	—	—	2	64	99	67	34	40	31	24	16	28	101
Total ...	506														

Vaccination against Smallpox 1951

124 people were vaccinated against smallpox during the year, 95 of whom were children under the age of one year. Nearly all the children were vaccinated at the Child Welfare Centre at Allan House.

SECTION IV

INFECTIOUS DISEASES

Summary of Notifications received in year 1951

Disease	Total Cases Notified
Scarlet fever	16
Whooping cough	7
Acute poliomyelitis	—
Measles	296
Diphtheria	—
Acute pneumonia	13
Dysentery	1
Smallpox	—
Acute encephalitis	—
Enteric or Typhoid fever	—
Erysipelas	3
Meningococcal infection	—
Food poisoning	—
Puerperal pyrexia	—
Ophthalmia neonatorum	—
Pulmonary tuberculosis	22
Other forms of tuberculosis	3
Total ...	361

Tuberculosis

The number of new cases notified during 1951 are given in detail in the following table:—

Age Period	New Cases			
	Respiratory		Non-Respiratory	
	M.	F.	M.	F.
0—1	—	—	—	—
1—5	—	—	1	—
5—10	1	—	—	2
10—15	—	—	—	—
15—20	—	4	—	—
20—25	1	1	—	—
25—35	6	1	—	—
35—45	2	1	—	—
45—55	1	1	—	—
55—65	2	—	—	—
65 & over	1	—	—	—
Totals	14	8	1	2

There were six deaths from tuberculosis during 1951.

REPORT OF THE Senior Sanitary Inspector

For the Year ending 31st December, 1951

To the Chairman and Members of the Public Health
Committee of the Urban District of Sowerby Bridge.

Mr. Chairman, Lady and Gentlemen,

I have pleasure in presenting to you the Annual Report on (a) the sanitary conditions in the area (b) housing conditions including overcrowding; and (c) inspection and supervision of food, for the year ended 31st December, 1951, and for the Cleansing Department for the year ended 31st March, 1952.

The report sets out in comparative detail the activities of the Department during the year, from which it will be seen that although a considerable amount of progress has taken place in various parts of the district, a great deal of time has been taken up with routine inspections, interviews and general assistance in public health problems which receive little or no publicity. The majority of the duties of the Sanitary Inspector are not very spectacular, but nevertheless it is surprising the number of people who come along to the Department with their troubles and general queries regarding housing and public health matters, and who are very appreciative of the assistance given.

The general improvement in the sanitary conditions continues, and once again satisfactory progress is reported. The stage is, however, being rapidly approached whereby either due to lack of adequate water supplies or sewerage systems further progress is limited, this mostly applies in the areas of Millbank and parts of Norland and Midgley.

The majority of the larger water supplies have been examined in detail, resulting in the condemnation of many of these. The Council have extended the water mains to cover certain of the properties concerned, and schemes are in preparation by the appropriate Department for further extensions. This does not imply that the future policy of the Council is to condemn out of hand private water supplies, but they are, however, deeply concerned with the numbers which show signs of pollution from time to time, and whilst certain private water supplies will be re-constructed the Council suggest that where possible a public supply should be installed.

Only under such conditions can they feel completely satisfied that the supply is adequate and wholesome for all time.

Two new sewers have been provided during the year, which has enabled schemes to be prepared for conversion of the sanitary accommodation to the water carriage system, and for the connection of existing drainage systems to the sewer.

Closely allied to the sanitary conditions is the cleansing of the district, which continues satisfactorily. The weekly collection being operated in some 80 per cent. of the area whilst the remainder continues on a fortnightly basis.

The Municipal ashbin scheme which was commenced in 1949 was a definite step in the right direction, the containers being standardised and replaced, conditionally, where necessary. Towards the end of the year the stocks of bins were almost exhausted, and although orders have been placed it may be some little time before replacements are available. Coupled with this is the unfortunate announcement that the galvanising of ashbins is no longer permitted. This will be quite a burden on the finances of the Department, for whilst the manufacturers offer alternatives—rustproof or painted bins, they do not compare with the life of the galvanised bin. The cost of the scheme, which is set out in detail in the report amounts to rather more than a penny rate.

The cost of refuse disposal has been more than covered by the sale of salvaged materials, which this year totalled £2,742, of which £2,502 was for waste paper. At the close of the year there appeared to be quite a glut of waste paper with the consequent reduction of the price of the same. It is most unfortunate that whilst the price remains high so many supposed dealers enter this line of business securing quite a large quantity of the paper of the district, but immediately the price is reduced they disappear almost overnight, and the Local Authority is then burdened with quantities of waste paper which may be difficult to dispose of. It is hoped that the Ministry will exercise some measure of control over the setting up of these short term businesses in order to safeguard both the established merchant and the Local Authority. Whilst the Local Authorities continue to collect waste paper as a benefit to the nation and a service to the public they feel entitled to pass on any financial benefit which may accrue to the ratepayers.

The collection of kitchen waste continues from both canteens and the communal bin, and is taken to a neighbouring authority for processing prior to disposal. The cost of collection and transport shows only a slight profit. Unfortunately these food bins create a nuisance from time to time, although every effort is made to reduce this to a minimum, by the sterilising and painting with special solution. One, however,

looks forward to the time when these objectionable containers may be removed from the streets of our town.

Housing inspections have continued during the year as the records indicate, but it becomes increasingly difficult to keep pace with this major problem. In 1939 many of the houses were sub-standard, but with the lack of maintenance due firstly to shortages and later to the ever increasing costs, the number of sub-standard houses has substantially increased. This has inevitably brought increased difficulties to the Sanitary Inspector in carrying out repairs, mainly on the grounds of unreasonable cost in relation to the value of the property, with the result that action is now generally taken under the Public Health Act and not the Housing Act.

The provisions of the Rent Acts at present are a very sore point with many of the owners, but it is hoped that steps will be taken in the near future to remedy the deficiencies in the existing legislation, and so provide for rents in accordance with the accommodation and amenities so provided. One, however, must not lose sight of the fact that although there have been difficulties in completing repairs, and costs have been high, there have been many conscientious owners who have endeavoured to keep their houses in a reasonable state of repair, whilst there are others who have ploughed little or nothing into the property which will have only one obvious end.

Many houses in the Urban Area have outlived their usefulness and to carry out extensive reconstructions would, I feel, be a waste not only of money and material but also in certain instances of a good site.

The transfer of the population from the town's centre to the more rural parts of the area has much to commend it, but it is felt that there are families who have a preference for a more centralised position in the district, and with this end in view it may, when the functions of the Housing Act in relation to Clearance Areas are once again resumed, provide suitable sites for either redevelopment, or alternatively, new estates.

It is pleasing to note the co-operation which exists between the food handlers and the department, and the efforts made by them to secure cleanliness in the storage, handling and distribution of food. The Council have, during the year, adopted the Food Byelaws made under the Food and Drugs Act, and in consultation with neighbouring authorities under the Chairmanship of the Medical Officer of Health, Dr. J. Lyons, explanatory leaflets and codes of practice have been prepared and forwarded to the food shops throughout the area.

New legislation which has become operative during the year, includes the Rag Flock Act, 1951. This Act is far more effective than previous Acts and gives the Local Authority

more power, as the duties are now their direct concern. The Act focusses attention on the need for the use of clean materials in such essential processes as upholstery and lining.

Another Act to be administered by the Department is the Pet Animals Act, 1951, which provides for the registering of all Pet Shops. Under this Act it becomes the duty of the Local Authority through their Inspector to inspect pet shops from time to time noting the general conditions under which the animals are kept prior to sale. The work will be carried out in full co-operation with the Veterinary Officer of the R.S.P.C.A.

In conclusion, May I record my appreciation of the interest shown by the Chairman, Coun. C. G. Hopkinson, and also the Health Committee for their assistance in the various duties which are undertaken by the Department. The valuable assistance and help so readily given by Dr. J. Lyons, Medical Officer of Health, has been deeply appreciated. My thanks are also due to the thorough manner in which the staff of the Department have worked, especially Mr. J. Holmes, Additional Sanitary Inspector, to the clerical staff and to the foreman of the Cleansing Department, together with the employees who have carried out the objectionable work of cleansing and disposal of refuse in a most efficient manner. In addition, I should like to thank all the officials of the Council, who have so kindly co-operated in supplying general information for the Report.

I remain, Mr. Chairman, Ladies and Gentlemen,

Your obedient servant,

WM. E. FOSTER,

A.M.I.S.E., M.S.I.A.,

Senior Sanitary Inspector.

October, 1952.

SANITARY CIRCUMSTANCES OF THE AREA

WATER SUPPLIES

Public Supply

The public water supply continues to give entire satisfaction, and the samples taken in various parts of the district are highly satisfactory.

The Department continues to work in close co-operation with the Waterworks Department, and at the end of the year one scheme for the extension of the main was completed, involving the supplying and fixing of some 55 yards of 3in. main, whilst two other schemes were very well advanced.

The smaller public supply at Norland also continues to give satisfaction, together with the Ripponden supply, which caters for parts of the Triangle area.

Samples taken for both bacteriological examination and Plumbo Solvency were satisfactory.

Private Supplies

The private water supplies continue to take up a considerable part of the Inspectors' time. Detailed reports have been given on all the larger private supplies throughout the area, and as a result, 10 of these have been condemned as unfit for human consumption, and statutory action taken in three instances. In these cases, the public supply has been extended to cover the properties in question, and so provide both an adequate and wholesome supply of water. These works are in the Luddenden and Luddenden Foot areas. The majority of Luddenden Foot continues to be served by a private water supply, which appears to be reasonably satisfactory, as the samples indicate. The water receives no treatment whatsoever, and consequently it is essential to keep an ever watchful eye on such supplies. There is no appreciable improvement in the Blackwood Hall School supply, and full precautions continue to be carried out. It is hoped that town's supply will be made available at some future date.

Reconstruction continues in the Midgley area, in which three supplies have been satisfactorily completed. In addition to this, one supply is being reconstructed, and negotiations are taking place in two others. It is possible that in both these cases, negotiations will be quite lengthy, but it is anticipated that they should be completed during 1952.

This will for the most part complete the reconstruction of the private supplies in the Midgley area, and will also allow for one of the larger private supplies to be extended to cover properties now being served by an unwholesome supply.

Millbank continues to be a source of trouble, as this part of the district is covered entirely by private supplies. A small

supply on the boundary has been condemned as totally unfit for human consumption, and it is anticipated that the main supply in the Ripponden area will, after negotiations have been completed, be extended to cover this property. The majority of this district is covered by one large private supply, and although it continues to be reasonably wholesome, insufficiency is generally experienced during the late summer. Accordingly, the supply cannot be considered adequate. Under these conditions, although sewers are available, it is not possible to continue the improvement of the sanitary conditions until an adequate water supply is available.

In the Norland area trouble is experienced from time to time with the shallow wells in Sparkhouse Lane, but it is anticipated that this will be cleared up in the near future.

There has, during the past few years, been a tremendous amount of time and effort put into the improvement of existing supplies and the extension of mains to cover properties served by polluted supplies. These efforts are now bearing fruit, and whilst further efforts are necessary, much has been accomplished, and one looks forward to the entire area being served in the not too far distant future with a suitable and sufficient water supply.

During the year 108 samples of water have been taken for bacteriological examination, of which 63 were unsatisfactory. Details of these are set out below:—

District	Bacteriological Examination			
	Sat.	U/Sat.	Susp.	Total
Sowerby Bridge	2	—	—	2
Luddenden Foot	18	5	7	30
Midgley	6	12	2	20
Sowerby	4	1	1	6
Triangle and Millbank ...	10	25	4	39
Norland	3	6	—	9
Rishworth supply	2	—	—	2
Totals	45	49	14	108

Plumbo-Solvency — 4 Satisfactory.

Drainage and Sewerage

Inspection of the rural parts of the area has continued with a view to the general improvement of the sanitary conditions. These improvements are now becoming limited, due either to an inadequate sewerage system or alternatively an insufficient water supply. Work has continued on the improvement of the sewers and the extension of the same, and it is pleasing to report that in addition to the Tray Royd sewer, completed during 1950, 565 yards of 6in. sewer has been provided and laid at Millbank, Triangle, whilst at New

Longley, Norland, 1,120 yards of 6in. sewer has been laid. Schemes have also been prepared by the appropriate department for the extension of the sewer at Dean House, Luddenden, and Shield Hall Lane, Sowerby, but these are temporarily held up.

At the end of the year, work was in progress for the extension of the drainage systems of all properties on these extended sewers, and schemes were being prepared for the conversion of the sanitary accommodation to the water carriage system, which should be completed during 1952.

There are still parts of the district which require an adequate sewer, in addition to numbers of cesspools which owing to their general condition should be abolished. Such matters are receiving attention, and although there are difficulties, one looks forward to a gradual improvement in these conditions as work on the extended sewers is completed. This work, when completed, will cut down to an absolute minimum the number of houses not connected to the sewer.

The routine matters of defective drainage systems and the extension of these has again been adequately dealt with by the Department.

Details relative to the inspections and tests are set out separately under the details of the general sanitary inspection of the area.

Sewage Disposal

The sewage disposal works at Milner Royd, Sowerby Bridge, and High Royd, Luddenden Foot, continue to give satisfaction, no complaint of the effluent having been received from the Rivers Board. The matter of the reception of trade effluent is still under consideration.

Sanitary Accommodation

The conversion of the more primitive types of sanitary accommodation to the water carriage system has continued during the year. The entire work has been completed by negotiation rather than by formal notice, and a contribution of £5 in each case has been made by the Council. With the extension of the sewer, it is hoped to complete the conversions on the same during the coming year, as the schemes are now advanced. The number of pails has again been reduced by 30, making a total of 625, the number of privies has also been reduced by 6, leaving a total of 45.

There have been 6 privies and 20 pails re-constructed in 1951 as W.C.s. The number of additional closets provided for old property during the year totalled 53, whilst 32 W.C.s were provided for new houses. The percentage of houses on the water carriage system is 85.4 per cent. Unfortunately, as mentioned in previous years, the accommodation is not all

separate, as a considerable amount of terraced houses and back-to-back houses have joint sanitary accommodation. This still continues to cause trouble, mainly owing to cleansing of the same, but unfortunately, due to the very limited space, it is not possible to increase the number of closets, in order to provide separate accommodation. One method of overcoming this very objectionable arrangement is by knocking the back-to-back houses into through houses, and providing bathrooms, but owing to the shortage of accommodation, this, at the present time is not possible. Such works will, however, require very careful consideration. The types of accommodation in the Urban area at the end of the year are as follows:—

District					Pails	Privies	Ashpits
Triangle and Mill Bank	...	...	...	...	75	11	—
Sowerby Bridge	...	...	...	...	30	—	—
Norland	...	...	...	...	128	5	—
Sowerby and Blackwood	...	...	...	...	139	25	—
Luddenden Foot (inc. Butts Green)	...	...	...	...	153	—	—
Midgley	...	...	...	...	100	4	—
Totals					625	45	—

Public Cleansing

The whole of the public cleansing, both collection and disposal, including the cleansing of pails, privies, etc., and the collection of trade and market refuse, is the direct concern of the Department, together with the collection and disposal of salvaged materials.

Refuse Collection

The cleansing of the district for the most part continues to be weekly, and only in a small percentage of the out-districts (approximately 20 per cent. with Karrier Bantam), does fortnightly collection take place. The communal ashbin accommodation, as the communal sanitary accommodation, continues to be very unsatisfactory, and causes a considerable amount of additional work in picking up, due to the whole of the bins in the accommodation not being properly used. The collection of garden refuse continues, and the facilities offered have left no cause for complaint.

An experiment was tried during the year requesting all the employees to take holidays either (a) two weeks annual holiday at the Wakes Week, or (b) Wakes Week and September Break. It was found, however, that this gave greater satisfaction than having the holidays staggered over a three

monthly period, as the collection for the whole of that time was not entirely satisfactory. With the collection ceasing for one week at the July Wakes or September Break, it was only a matter of a very short time before regular collection was resumed, causing very little inconvenience, holidays therefore continue on this basis.

Both the Karrier Bantam and the Bedford 7 have been completely overhauled during the year. This meant that the vehicles were out of commission for approximately eight weeks. As four vehicles are necessary to cleanse the district efficiently, arrangements were made for one team to collect pails, etc., during the night, and so utilise one vehicle both night and day. This arrangement worked quite satisfactorily, and with the co-operation of the employees, no inconvenience was suffered in any part of the district.

Details of the work of each vehicle are set out as follows:

Vehicle.	Ashbins.	Ashpits	Pails.	Loads.	Tons	Cwt.
S. and D. No. 5	10781	—	—	98	259	—
Karrier No. 6	23192	28	—	1053	1265	14
Bedford No. 7	82067	52	—	1097	1471	17
Bedford No. 8	6325	164	29727	819	1385	—
S. and D. No. 9	100576	—	—	481	1849	6
Totals	222941	244	29727	3548	6230	17

Transport

At the beginning of the year the S. and D.5 rear loading moveable floor was disposed of, and in view of the district to be cleansed, after careful experiment, it was decided to purchase an S.D. Fore and Aft Tipper. The work has been carried out with this vehicle with much less fatigue to the loaders, mainly on account of the ground low loading and the absence of trimming. The round has actually been completed quicker.

A complete body overhaul of the 1946 Karrier Bantam and the 1947 Bedford 7 has been completed during the year, and the vehicles generally continue to be serviced at local garages, and the period for repairs is by arrangement cut down to the absolute minimum. General maintenance is carried out by the drivers concerned, and special time is allowed for this work. Cleansing continues to be carried out with specially designed vehicles, and the dust nuisance is cut down to an absolute minimum.

The transport operated by the Department is set out as follows:—

No.	Make	Year of Purchase	Capacity	Service
5	S & D Moveable Floor	1939	16 cu. yds.	Ashbins. Taken off road May '51.
6	Karrier Bantam	1946	7 cu. yds.	Ashbins, Salvage & Trade Refuse.
7	Bedford 7	1947	7 cu. yds.	Ashbins
8	Bedford 8	1949	7 cu. yds.	Pails and Pits
9	S & D Rear Loader	1951	16 cu. yds.	Ashbins

Storage

The comparative figures of the refuse storage in the district are set out below. It is pleasing to note that with the continued improvement of the sanitary conditions there is a consequent reduction in the number of pails and privies, whilst the number of ashbins continues to increase.

Year 1	Pail Closets 2	Privies 3	Ash Pits 4	Ash Bins 5
1948	683	72	—	6153
1949	672	60	—	6174
1950	655	51	—	6197
1951	625	45	—	6208

Municipal Ashbin Scheme

The above scheme, which was brought into operation on the 1st January, 1949, continues to work satisfactorily. During the year 263 ashbins have been supplied free of charge under the scheme, whilst 43 have been supplied either at the request of certain owners following the conversion of privies, or under Notice—Section 75 of the Public Health Act, 1936. In the latter case every notice was complied with. The general details of the municipal ashbin scheme, together with the provision of pails, etc., is set out below:—

	£	s.	d.	£	s.	d.
Cost of Ashbins supplied during the year	400	10	0			
Cost of pails supplied during the year	31	18	0			
				432	8	0
Bins charged for	50	9	10			
Pails charged for	—	—	—			
				50	9	10
Cost of Municipal Ashbin Scheme	£381	18	2			

Trade Refuse

Trade refuse throughout the district continues to be removed regularly, the general charge remaining the same, that is, that one bin of refuse is removed free of charge, whilst a charge of 6d. for every additional bin or part thereof is made. The amount of trade refuse removed during the year totals some 162 tons. This has brought in a revenue of approximately £42.

Refuse Disposal

The entire disposal of house refuse is now carried out at one of the two controlled tips, either at Milner Royd or alternatively at Daisy Bank. These continue to be worked in an efficient manner. There has during the year been rather a severe infestation of crickets, but this has been successfully dealt with. Routine checks for rodents have been made, and although the tip has been infested from time to time, these have not been severe. Both tips have been suitably treated with approved insecticides, which I consider have helped considerably in the eradication and prevention of infestation.

Salvage

I am pleased to report once again that there has been no difficulty with the disposal of the salvaged materials sorted from the tip face and that collected on the rounds. The need for the salvaging of all waste paper at the end of 1950 has continued throughout the year. Unfortunately, with the inflated price, the amounts being collected by the Department could have been greater had it not been for waste paper dealers setting up depots within the Urban District, and also waste paper merchants canvassing the area from time to time. The revenue produced shows an increase of £1519 9s. 8d. on the previous year. As in previous years, the entire output of waste paper has been forwarded to Thames Board Mills, as per the terms of contract.

The bonus scheme for the employees has continued to work quite satisfactorily, and I feel has assisted in keeping the quantity around 13 tons per thousand of the population. Details of the sale of residuals, together with the revenue are set out below:—

Materials Salvaged.				T. C. Q.			£ s. d.		
Waste Food	...	...	...	60	4	0	...	178	17 0
Waste Paper	...	...	...	161	14	3	...	2488	18 1
Books	...	...	...	0	17	0	...	13	12 0
Ferrous Metals	...	...	...	8	19	3	...	27	18 0
Non-Ferrous Metals	...	...	...	0	5	1	...	17	15 0
Textiles	...	...	...	0	5	1	...	6	12 6
Crushed Tins	...	...	...	5	14	1	...	8	16 2
				238	0	1	...	2742	8 9

The details of the salvage recovered by the Council since November, 1939, are set out overleaf.

SALVAGE SALES 1939 to 1951

Year	Total Tonnages for all Materials		Waste Paper		Ferrous Metals and Loose Tins		Non-Ferros Metals		Textiles and Rubber		Cullet		Kitchen Waste and Bones		Value	
	T.	C. Q.	T.	C. Q.	T.	C. Q.	T.	C. Q.	T.	C. Q.	T.	C. Q.	T.	C. Q.	£	s. d.
1939	9	1 2	7	1 2	2	0 0	—	— —	—	— —	—	— —	—	— —	20	1 0
1940	380	3 0	240	3 1	106	0 3	13	2	2	3 2	15	15 1	15	6 3	1259	3 7
1941	453	17 3	281	9 2	90	1 1	1	10 0	7	14 3	55	14 0	17	8 1	1445	6 2
1942	380	6 3	286	10 1	66	5 3	1	11 1	5	10 3	15	2 1	5	6 2	1783	17 3
1943	382	2 2	196	16 2	125	10 3	6	1	4	13 2	31	12 1	23	3 1	1595	6 6
1944	428	16 1	148	18 1	9	12 1	—	— —	16	0	5	5 0	264	4 3	1379	8 5
1945	506	3 0	112	16 3	6	19 0	6	0	8	0	9	14 2	375	18 3	1315	0 9
1946	386	7 3	112	19 1	9	4 0	7	3	15	2	16	1 1	247	0 0	1133	3 9
1947	199	8 0	92	2 3	5	12 0	12	0	11	2	8	15 2	91	14 1	699	1 10
1948	199	9 0	110	10 3	6	17 3	3	3	6	0	5	1 3	76	9 0	871	6 4
1949	237	0 0	155	13 1	12	3	—	— —	4	1	2	11 3	77	18 0	1097	6 10
1950	215	12 2	158	6 0	4	10 2	19	1	1	3	—	— —	51	15 0	1222	19 1
1951	238	0 1	162	11 3	14	14 0	5	1	5	1	—	— —	60	4 0	2742	8 9
	4016	8 1	2065	19 3	448	0 3	6	15 0	23	10 3	165	13 2	1306	8 2	16564	10 3

Infectious Disease and Disinfection

Visits in connection with notifiable infectious disease have continued throughout the year, and disinfection carried out where necessary. The necessary investigations for the prevention of the spread of disease have taken place. The details of the visits, etc., in connection with the same are set out below:—

Enquiries into cases of infectious disease	35
Miscellaneous infectious disease visits	78
Visits re disinfection, etc.	35

Smoke Abatement

Unfortunately, due to pressure of work in other directions, the observations of the factory chimneys have been seriously curtailed. There has been no complaint of any excessive emission of smoke during the year, and this has been verified by observations taken from time to time. There were no statutory notices issued during the year or prosecutions made, although cautions were issued in cases where excessive smoke was emitted.

There does not appear to be any serious increase in the pollution of the atmosphere from this source, but even so, it is hoped that the Department will be able to devote a little more time during the coming year to this very important branch of the work, for which we are responsible.

Application has been made to the Ministry of Housing and Local Government for the adoption of the two minute byelaw.

Factories

As a result of general inspection and complaint from H.M. Factories Inspectors, 35 inspections of the factories throughout the district have been made, during which 11 contraventions of Section 7 of the Factories Act were observed. 10 of these, together with 2 which were outstanding at the end of 1950 were satisfactorily completed, leaving one outstanding at the year end. Details of the inspections and defects are set out in the following tables:—

Inspections

Factories	No. on Register	No. of Inspections	Written Notices
In which Sections 1, 2, 3, 4 and 6 enforced by Local Authority	23	7	2
Where Section 7 is enforced	129	28	7
Total ...	152	35	9

Defects Found

Perticulars	Found	Remedied	Referred by H.M. Inspector
Sanitary Conveniences			
(a) Insufficient	2	2	—
(b) Unsuitable or defective	7	9	1
(c) Not separate for sexes ...	2	1	—
Total ...	11	12	1

Swimming Bath

The Public Swimming Bath has again been available to the public during the year, during which time the water from both the inlet and outlet have been sampled for bacteriological examination. All the samples were found to be satisfactory. The chlorine content of the bath continues to register .5 parts per million, and there appears to have been very few complaints from the bathers. The filtration plant, together with the chlorine gas plant continue to give satisfaction. There are no private swimming pools in the area.

Nuisances

As a result of general observation and complaint, 237 nuisances were found during the year. At the end of 1950 there were 54 which required further attention, making a total of 291. The total abated during the year numbered 267, which necessitated visits and inspections totalling 545. The majority of the work was carried out in an informal manner, 201 informal notices being served, together with 12 statutory. All the statutory notices were complied with, whilst 24 of the informal still require attention. This does not include notices served for the reconstruction of water supplies, which have been dealt with separately under that heading. The majority of the formal notices outlined here were served under Section 75, for the provision of bins, and Section 39 for the repair of defective drainage systems. The nuisances have been attended to in a comparatively expeditious manner, whilst every assistance for the early completion has been given by the Department.

Offensive Trades

There have been no additions during the year to the Register of Offensive Trades, and no applications have been received. The general conditions are considered to be reasonably satisfactory, especially regarding the Fried Fish Shops. The number of inspections of these premises completed during the year totalled 36.

Sanitary Inspection of the Area

	Visits.
Bakehouses	37
Camping Sites	7
Common Lodging Houses	5
Conversions—Visits	86
Dangerous Buildings	9
Drainage, etc.	358
Factories	38
Fried Fish Shops	31
Houses Let in Lodgings	7
Miscellaneous Sanitary Visits	69
Offensive Trades	5
Petrol Pump Inspections	19
Public Conveniences	12
Refuse Collection	362
Refuse Disposal	83
Rodent Control (excluding Sewer Maintenance)	202
Sanitary Accommodation—Defects	85
Schools	31
Shops	75
Smoke Observations	8
Stables and Piggeries	13
Tents, Vans and Sheds	12
Theatres and Places of Entertainment	6
Water Courses—Survey	32
Water Supplies	278
Yards—Paving, etc.	16
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HOUSING

General Inspection

Housing inspection has continued during the year, and essential repairs found as a result of routine inspection and complaint have been completed with as little delay as possible. Very little improvement has been forthcoming in the housing position in the more congested parts of the district, rather has the position in much of the sub-standard property deteriorated. In the more rural areas, improvements have continued, but these have been mainly in relation to sanitary conditions, including water supplies, sanitary accommodation, refuse accommodation, provision of new sinks, etc., which have also resulted in further improvements being completed. This has not appertained in all cases, for there are many of the rural dwellings which are in a deplorable state, due not only to the situation, but to the very low rent such dwellings attract. Such dwellings are being closed immediately they are vacated.

During the year two certificates have been issued, after inspection, under the Rent and Mortgage (Interest) Restrictions Act, on representation being made at the Department.

During the year we have had the unfortunate experience of having squatters in certain derelict properties owned by the Council, which were actually in the course of demolition. Although the necessary action was taken by the Council, they were considerate in the matter, and it is pleasing to report that alternative accommodation was obtained in consultation with private landlords.

In the course of the year some 16 houses of the permanent type were erected by the Local Authority, and two by private enterprise. This goes very little towards dealing with the large numbers that are awaiting suitable alternative accommodation, but it is hoped with the ambitious programme of the future that the position will be greatly improved. When this comes about, we may be in a position to re-commence surveys for clearance areas.

25 new cases of overcrowding have been investigated, these without exception have been due either to increases in families or age increases. During the year 8 existing cases have been abated, by re-housing, showing an increase of 17 over the previous year.

Inspection continues each half year on all overcrowded and possibly overcrowded houses, and the cards brought up to date by the statistics to hand of births and deaths. Unfortunately, this cannot be considered to be absolutely correct, as it is not always possible to keep track of all changes in tenancies.

The housing statistics for the year 1951 are set out as follows:—

1 Inspection of dwelling houses during the year.

- | | | | | | |
|--|-----|-----|-----|-----|-----|
| (1) (a) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) | ... | ... | ... | ... | 401 |
| (b) Number of inspections made for the purpose | | | | | 588 |
| (2) (a) Number of dwellinghouses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations | ... | ... | ... | ... | 140 |
| (b) Number of inspections made for the purpose | | | | | 183 |
| (3) Number of dwellinghouses needing further action:— | | | | | |
| (a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation | ... | ... | ... | ... | 7 |

(b)	Number (excluding those in sub-head (3) (a) above), found not to be in all respects reasonably fit for human habitation	... 370
2	Remedy of defects during the year without service of formal notices.	
	Number of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their officers	... .. 283
3	Action under Statutory Powers during the year.	
A	Proceedings under Sections 9, 10 and 16, Housing Act, 1936:—	
(1)	Number of dwelling houses in respect of which notices were served requiring repairs	7
(2)	Number of dwelling houses which were rendered fit after service of formal notices:	
(a)	By owners	... .. 6
(b)	By Local Authority —
B	Proceedings under Public Health Acts.	
(1)	Number of dwelling houses in respect of which notices were served requiring defects to be remedied	... .. 69
(2)	Number of dwelling houses in which defects were remedied after service of formal notices:—	
(a)	By owners	... .. 61
(b)	By Local Authority in default of owners —
C	Proceedings under Sections 11 and 13 of the Housing Act, 1936.	
(1)	Number of representations, etc., made in respect of dwelling houses unfit for habitation	... .. 2
(2)	Number of dwelling houses in respect of which Demolition Orders were made	... 3
(3)	Number of dwelling houses demolished in pursuance of Demolition Orders	... 3
D	Proceedings under Section 12 of the Housing Act, 1936.	
(1)	Number of separate tenements or underground rooms, in respect of which Closing Orders were made	... .. Nil
(2)	Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit	... .. Nil

4 Housing Act, 1936—Part IV—Overcrowding.

(a) (1) Number of dwellings overcrowded at the end of the year	67
(2) Number of families dwelling therein ...	76
(3) Number of persons dwelling therein ...	375
(b) Number of new cases of overcrowding reported during the year	25
(c) (1) Number of cases of overcrowding relieved during the year	8
(2) Number of persons concerned in such cases	35
(d) Number of inspections made	436

The cases of overcrowding in the district are set out as follows:—

Ward	Old Cases.	New Cases.	No. Abated.	Total
North	1	2	—	3
South	3	2	2	3
Central	9	2	2	9
East	12	3	1	14
Sowerby/B.Wood	2	3	—	5
Triangle/Norland	10	4	2	12
Luddenden Foot	9	4	—	13
Midgley	4	5	1	8
	—	—	—	—
Total	50	25	8	67
	—	—	—	—

5 New Houses.

Number of new houses provided during the year:

By the Local Authority:—

Permanent type	...	...	...	16
Temporary type	...	...	...	Nil

By Private Enterprise 2

6 Housing Act, 1949.

No applications for grants have been received from persons improving existing housing accommodation, as per Section 20.

INSPECTION AND SUPERVISION OF FOOD

Milk Distribution

Very few visits have been made to the farms during the year, as the general inspection of the farms is the duty of the Ministry of Agriculture and Fisheries. Whilst the Ministry have continued the inspections of designated farms, it appears that many of the ordinary raw milk producers have been neglected, and accordingly the high level which was attained whilst these were under the jurisdiction of this Authority appears to be deteriorating. This is unfortunate as in many

cases the milk is not going to a pasteurising establishment for treatment but is being retailed in its raw state in many parts of the district. It is interesting to note, however, the increase in the number of dealers, etc., in designated milk, with a consequent increase in the consumption of Tuberculin Tested or Pasteurised milk. Nevertheless, in view of the apparent high incidence of non-pulmonary Tuberculosis, it is, I feel, essential that Tubercule free milk should be retailed throughout the district. At the year end there were some 49 registered distributors of milk in the area, details of these being as follows:

Supplementary Licences to Retail Pasteurised Milk	...	3
Supplementary Licences to Retail Tuberculin Tested Milk		3
Supplementary Licences to Retail T.T./Pasteurised Milk		1
Supplementary Licences to Retail Sterilised Milk	...	3
Dealer's Licence to use the designation T.T./Pasteurised		14
Dealer's Licence to use the designation Pasteurised	...	12
Dealer's Licence to use the designation Tuberculin Tested		1
Dealer's Licence to use the designation Sterilised	...	12

Milk Sampling

During the year 38 samples of milk have been obtained from retailers of designated and raw milk, with the following results:—

Designation	Satis.	Unsatis.	Total
Tuberculin Tested ...	2	—	2
Accredited	1	—	1
T.T./Pasteurised	2	—	2
Pasteurised	6	2	8
Raw Milk	21	4	25
Total ...	32	6	38

In addition, 4 samples of milk were taken for biological examination, all being negative.

Food Inspection

Regular inspection of the food shops, cafes, restaurants, etc., has continued during the year. Details of the visits are set out below:—

Butchers' Shops	...	...	...	...	...	55
Canteens	...	...	...	...	...	3
Cow Sheds	...	...	...	...	...	3
Dairies and Milk Shops	...	...	...	...	...	20
Fish Merchants and Poulterers	...	...	...	...	...	9
Food Preparing Establishments	...	...	...	...	...	25
Greengrocers and Fruiterers	...	...	...	...	...	11
Grocers	...	...	...	...	...	51

Ice Cream Premises	59
Pasteurising Plant	6
Public Houses	21
Public Markets	108
Restaurants	15
Miscellaneous Food Visits	28
Total ...	414

The general condition of the premises, including the equipment, was considered to be quite satisfactory. Efforts were made to comply with the recently introduced Clean Food Byelaws, and in many cases sinks with hot water supply were provided and fixed. The management and staffs in the majority of instances appear to be fully conscious of their responsibilities in keeping food clean and preventing the spread of disease, and it was pleasing to note the generally high standard of cleanliness maintained. As a result of these inspections, a quantity of food was surrendered as unfit for human consumption. Details are set out below:—

	Tons.	Cwts.	Qrs.	Lbs.
Meat	8	0	12 $\frac{1}{2}$	
Flour	6	1	24	
Biscuits	4	0	27	
Fruit	1	3	18	
Vegetables	1	2	18	
Fish		3	8 $\frac{1}{4}$	
Miscellaneous Foodstuffs ...		1	2 $\frac{3}{4}$	
Total ...	1	3	1	26 $\frac{1}{2}$

Milk, 106 tins; Shredded Wheat, 49 packets; Mustard, 19 tins; Soup, 13 tins.

Towards the end of the year representation was made to the Ministry of Food regarding the large quantities of tinned hams both large and small which were being condemned. Very careful examination was made, and it appeared that the conditions of storage were not being complied with by reason of the fact that the tins were not being kept in a refrigerated condition, which in many cases was well nigh impossible, and again it appeared that the processing of the tins did not appear to be complete, as a chemical action appeared to be set up between the tin and the contents, causing a certain amount of decomposition.

The Ministry were concerned, and were kept informed, but it was pointed out that the Ministry did not purchase, import or distribute these hams, as they were in the main brought in by private traders under an open general licence.

The Ministry appeared to be concerned with the official certificate, which is recognised for the purposes of Public Health (Imported Food) Regulations, 1947 and 1948, and which is a guarantee that in the country of origin every precaution has been taken in the preparation of these hams so as to prevent as far as possible any danger to health. It will be interesting to see whether there is any appreciable improvement in the coming year.

During the year 818½lbs. of ham were condemned as unfit for human consumption, the majority being in small 8oz. tins.

Ice Cream

At the end of the year there were 52 premises registered under Section 14 of the Food and Drugs Act, 1948, for the sale of ice cream. The ice cream, with one exception, was manufactured outside the district, and in the majority of cases was delivered in pre-packed containers. Only in 7 instances was the ice cream received in bulk and distributed in that manner. In one instance the ice cream was manufactured from a cold mix and generally the conditions were found to be quite satisfactory, although it is highly probable that this manufacturer will discontinue this practise in the near future.

The number of inspections and visits made on these premises totalled 59. The number of samples submitted for bacteriological examination were 76, of which 52 proved to be satisfactory, and 24 unsatisfactory. The figures are actually much better than they appear, as some 16 unsatisfactory samples were obtained from one manufacturer, but it is pleasing to note that with the co-operation of the authority concerned and the efforts of the manufacturer, several satisfactory samples were obtained towards the end of the season. In addition to the ice cream samples, the rinse used for the equipment where the ice cream was sold loose was also sampled, and in all cases was found to be satisfactory. There was no action taken under Sections 16 and 37 of the Act during the year.

FOOD PREPARING ESTABLISHMENTS

Bakehouses

The general overhaul and repairs outlined in my last report were completed during the year, and a reasonably high standard of cleanliness has been maintained. It is pleasing to note that the work on the construction of a model bakery in the district has now been commenced, and should be completed during the coming year. The bakehouses throughout the area have been visited and inspected on 37 occasions, during which no contraventions of the Act were observed. At the present time there are 17 bakehouses in the district, none of which are of the underground type.

Cafes and Restaurants

The routine inspection has continued during the year and the majority of the work which was outlined in the detailed report recently submitted to the Council has been almost completed, and it is pleasing to note the general improvement which has taken place. It is also gratifying to note the gradual increase in the number of establishments utilising detergents and sterilising agents in the washing up, which is all bringing about the improvement desired. Unfortunately there are still one or two black spots, and if the necessary improvement is not forthcoming, drastic action will have to be taken. It is unfortunate that such places exist, especially when the majority are aiming at a high standard of cleanliness.

Public Houses

All minor works which were outlined in the detailed report submitted during 1950 have been completed, but unfortunately many of the major works, owing to licencing difficulties, are still outstanding. The owners appear very anxious to carry out these major reconstructions, which will be completed immediately the necessary licences are to hand. With the co-operation of both owner and occupier, and with the general improvement in the washing facilities which exist, I feel very satisfied with the work done in this direction.

Food Poisoning

There have been no cases of food poisoning notified during the year.

Rodent Control

As a result of inspection and complaint, 58 premises were given full treatment. The infestation was not severe, and only one major infestation was observed. Details of the treatments are as follows:—

Refuse Disposal Sites	2
Salvage Depot	1
Private Dwelling Houses	37
Business Premises and Factories ...	18
	—
	58
	—

In order that this work could be completed satisfactorily, 240 visits and inspections were made. The work for the most part was carried out with sausage rusk as a base and zinc phosphide or arsenic as the poison. It is hoped to carry out experiments and treatments with the new technique suggested by the Ministry of Agriculture and Fisheries during the coming year. The results obtained after post baiting were quite satisfactory, and the premises treated for the most part were cleared in a very satisfactory manner.

The sewers of the district have again been treated on two occasions on approved lines, and details of these are set out below:—

Section	No. of Man-holes	No. not baited	No. Baited	Pre-bait taken			
				C	P	Total Takes	N.T.
Millbank/Triangle ...	69	27	42	13	4	17	25
Sowerby/Triangle ...	65	35	30	10	2	12	18
Luddenden Foot Dist. ...	77	23	54	21	1	22	32
Midgley District ...	67	49	18	—	—	—	18
Sowerby/Ludd. Foot ...	99	43	56	5	—	5	51
Sowerby Bridge Sec. 1 ...	92	78	14	3	—	3	11
Sowerby Bridge Sec. 2 ...	124	96	28	11	3	14	14
Sowerby Bridge Sec. 3 ...	121	58	63	16	2	18	45

C — Complete Take P — Partial Take NT — No Take

Once again a test bait was undertaken prior to the maintenance treatments being completed. It is again pleasing to note that large sections of the sewers and the entire housing estate of Beechwood were entirely free from infestation. The black spots were generally the same as in previous years, and were in close proximity to food stores, storm overflows, etc. There does not appear to be an increase in the complaints from this source, and one would therefore assume that the works completed in conjunction with sewer baiting are beneficial in preventing the spread of the rat population. The report on rodent control has again been taken from the 1st April, 1951, until the 31st March, 1952, and is similar to the return forwarded to the Ministry of Agriculture and Fisheries.

